

The Sri Lanka Tourism Development Authority
APPLICATION FORM

Position Applying: Director/ Tourism Planning & Development

1. Personal Details

- 1.1 Full Name : Mr./Ms.
- 1.2 Name with Initials : Mr./Ms.
- 1.3 Date of Birth : 1.4 Age as at 03.07.2026: Y..... M D
- 1.5 Residence Address :
.....
- 1.6 Postal Address :
.....
- 1.7 Mobile No. :
- 1.8 Residence Tel. No. :
- 1.9 National Identity Card No. :
- 1.10 Email Address :

2. Educational Qualifications:

2.1 Bachelor's Degree

Degree	University/ Institute	Valid Date	Copy of the certificate to be attached
			Annexure (...)
			Annexure (...)

2.2 Master's Degree

Master's Degree	University/ Institute	Valid Date	Copy of the certificate to be attached
			Annexure (...)
			Annexure (...)

2.3 Doctorate

Degree	University/ Institute	Valid Date	Copy of the certificate to be attached
			Annexure (...)
			Annexure (...)

2.4 Diploma/ Higher Diploma/ Post Graduate Diploma

Diploma/ Higher Diploma/ Post Graduate Diploma	University/ Institute	Duration			Copy of the certificate to be attached
		From	To	No. of months/ Years	
					Annexure (...)
					Annexure (...)
					Annexure (...)
					Annexure (...)
					Annexure (...)

2.5 Certificate Courses

Certificate Course	Institute	Duration			Copy of the certificate to be attached
		From	To	No. of months/ Years	
					Annexure (...)
					Annexure (...)
					Annexure (...)
					Annexure (...)
					Annexure (...)

3. Professional Qualifications:

Membership obtained	Institute	Valid Date	Copy of the certificate to be attached
			Annexure (...)
			Annexure (...)
			Annexure (...)
			Annexure (...)
			Annexure (...)

4. Work Experience:

Years & Months		Position	Organization	Copy of the certificate to be attached
From	To			
				Annexure (...)
				Annexure (...)
				Annexure (...)
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				Annexure (...)
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5. Other Skills and Performances:

	Area of acquired skills/ Performances/ Extra Curricular Activities	Copy of the proof documents to be attached
		Annexure (...)
		Annexure (...)
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		Annexure (...)

6. Details of Two Non Related Referees

6.1 Name :

Address :

Contact No. :

Email :

6.2 Name :

Address :

Contact No. :

Email :

I do hereby certify that the above particulars furnished by me are true and correct to the best of my knowledge and forward the same for your kind consideration.

.....
Signature of the Applicant

.....
Date

2026.

**Director General,
Sri Lanka Tourism Development Authority**

Application is recommended and forwarded, Mr./Ms.
service of the post of and, I certify that the particulars given
in numbers 01 to 15 of this application are correct according to the applicant's personnel file and
if he/she is selected for the said post he/she can be / cannot be released.

Remarks if any

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Signature of the Head of the Governing Body & Official Stamp